Results | Who is Who |

| On-line Help |

Occupational Safety & Health Survey (Employee)

You are taking the: Survey

Your Site is:

Your Supported Organization is: Your are taking the survey on:

Your Department is: Your Control Number is: Your Division or Group is:

Visible management leadership provides the motivating force for an effective safety and health program.

| My annual performance plan contains my requirements for organization's safety and health program goals. | helping achieve my |
|--|--|
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A C Don't Know C |
| | |
| 2. Specific safety and health objectives have not been develo | pped for my organization. |
| Strongly Disagree C 5 C 4 C 3 C 2 C 1 Totally Agree | N/A O Don't Know O |
| | |
| 3. Safety committees comprised of representatives from mar and employees have been established and are active in the o | nagement, contractors, unions, organization. |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A O Don't Know O |
| | |
| 4. Senior management involves the safety committee in reviews of the effectiveness of the safety and health program. | |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A C Don't Know C |
| | |
| 5. I am familiar with the policies, goals, and objectives stated in the agency safety program's Core Process Requirements (CPR). | |
| Not at All C 1 C 2 C 3 C 4 C 5 Totally Familiar | N/A C Don't Know C |
| | |
| 6. Staff safety meetings, including all levels of the workforce | , are regularly held at this site. |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A O Don't Know O |
| | |
| 7. A strong management commitment to safety exists in my organization. | |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A C Don't Know C |

Employee participation provides the means through which workers identify hazards, recommend and monitor hazard abatement, and otherwise participate in their own safety and health program.

| 8. Management has encouraged open communication about safety and health throughout the workforce. | |
|--|---------------------------------|
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A C Don't Know C |
| | |
| 9. Safety and health procedural documentation and directive work area. | s are kept up-to-date in my |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A O Don't Know O |
| 10. I am confident that I know the proper procedure to deal voccur in my work area. | with any emergency that may |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A O Don't Know O |
| 11. I am aware of my rights to contact OSHA with safety and reprisal. | health concerns without fear of |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A C Don't Know C |
| 12. I am aware of the locations of emergency equipment (fire first aid kits) used in my workplace to deal with emergencies | |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A C Don't Know C |
| | |
| 13. I am encouraged and authorized to stop unsafe activities or health incidents. | that can lead to serious safety |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A C Don't Know C |
| | |
| 14. I have the opportunity to review the hazards and controls | |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A O Don't Know O |
| | |
| 15. I am encouraged to provide inputs and suggestions for the safety and health program in my work area. | ne purpose of improving the |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A O Don't Know O |
| | |
| 16. Employees participate in safety inspections of facilities a | |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A C Don't Know C |
| 17. I am encouraged to inspect my work area to identify safe | ty and health hazards |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A O Don't Know O |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A C DON (KNOW C |
| 18. Safety inspection results are made available to employee | s for review and information. |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A O Don't Know O |
| | |
| 19. A Close Call reporting system is used to provide an effect to safety/health problems. | ive means of calling attention |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A C Don't Know C |

| | 1 |
|---|---------------------------------|
| 20. I am provided with a safe and healthful environment. | |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A O Don't Know O |
| | |
| 21. I am familiar with the names and locations of the safety racility safety reps, etc.) for my work area. | representatives (fire wardens, |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A O Don't Know O |
| Management provides implementation tools which inclupersonnnel, assigned responsibility, adequate expertise hold responsible persons accountable (line accountabiliprocedures, directives, and methods criteria analysis. | e and authority, means to |
| 22. Supervisory responsibility for safety and health in my wo | rk area is clearly defined. |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A C Don't Know C |
| | |
| 23. My management recognizes and supports my defined safe | ety responsibilities. |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A C Don't Know C |
| | |
| 24. My job safety accountability has been clearly defined and other job responsibilities. | is, at least, equal with my |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A C Don't Know C |
| | |
| 25. Management recognizes and supports the safety department work area. | nent's requirements for my |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A C Don't Know C |
| | |
| 26. The information necessary for me to carry out my safety available in my work area. | and health responsibilities is |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A O Don't Know O |
| | |
| 27. The resources for safety and health are <u>not</u> adequate to rarea. | meet the needs of my work |
| Strongly Disagree C 5 C 4 C 3 C 2 C 1 Totally Agree | N/A C Don't Know C |
| | |
| 28. My safety and health needs are being met in my work are | a. |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A C Don't Know C |
| | |
| 29. Safety and health representatives have adequate expertimy work area. | se to work the safety issues in |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A C Don't Know C |

Survey and Hazard Analysis: An effective safety and health program will seek to identify and analyze all hazards. In large or complex workplaces, components of such analysis are the comprehensive survey and analyses of job hazards and changes in conditions.

| 30. A hazard analysis has been conducted for my job and is u | ipdated as necessary. |
|---|---------------------------------|
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A C Don't Know C |
| | |
| 31. Regular surveys (walk-throughs), which include employed | |
| myself, are conducted to evaluate safety hazards and control | |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A O Don't Know O |
| | |
| 32. I am satisfied that I have been adequately informed aboumy job. | it the hazards associated with |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A O Don't Know O |
| | |
| 33. Hazard elimination is a goal of my work area. | |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A O Don't Know O |
| | |
| 34. When hazard elimination is not possible, other controls (sthe use of barriers and guards, the use of personal protective procedural work-around techniques) are used. | |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A O Don't Know O |
| Inspection: An effective safety and health program will inspections to identify new or previously missed hazard controls. | |
| 35. Employee input into safety inspections in my work area is | s encouraged. |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A O Don't Know O |
| | |
| 36. Safety inspections are performed in my work area, and the | ne results are documented. |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A C Don't Know C |
| 37. Safety follow-up inspections are conducted in my work ar | too to verify that identified |
| hazards have been properly eliminated or controlled. | ea to verify that identified |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A C Don't Know C |
| Reporting: A reliable hazard reporting system enables e reprisal, to notify management of condition(s) that app timely and appropriate response. | |
| 38. I believe the hazard and close-call reporting systems are possibility of mishaps in my work area. | effective tools in reducing the |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A O Don't Know O |
| | |
| 39. I am familiar with the procedures for formally reporting hwork area. | nazards and close-calls in my |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A O Don't Know O |
| | |

| 40. Open hazards or safety deficiencies which could affect er made known to workers. | mployees in my work area are |
|--|---|
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A C Don't Know C |
| 41. I am satisfied that reported hazards are promptly eliminates. | ated/controlled in my work |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A C Don't Know C |
| 42. I am aware of the NASA Safety Reporting System (NSRS). | |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A C Don't Know C |
| 43. I am encouraged to report close calls which occur in my v | vork area. |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A O Don't Know O |
| Mishap I nvestigation: An effective safety program will p mishaps and close call incidents, so that their causes, a prevention, are identified. 44. All loss-producing mishaps and close calls that occur in n | nd the means for their |
| to determine root cause. | |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A O Don't Know O |
| AE Employees from mouseup and posticinate in mich on and | alaca call investigations |
| 45. Employees from my work area participate in mishap and Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A C Don't Know C |
| 46. If you have submitted a Close Call report, did you receive response? | e prompt attention and timely |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A C Don't Know C |
| 47. There is a clear top-down commitment to mishap avoidar | nce in my work area |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A C Don't Know C |
| 48. Mishap prevention information (posters, signs, etc.) is po | stad in my work area |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A C Don't Know C |
| | |
| 49. Mishap investigation and prevention includes consideration ergonomic injuries. | on of the potential for |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A O Don't Know O |
| Data Analysis: An effective program will analyze injury a indications of sources and locations of hazards, and ide higher numbers of injuries. By analyzing injury and illne patterns with common causes can be identified and pre | ntify jobs that experience ess trends over time, |
| 50. Statistical mishap and injury data are regularly collected required by OSHA. | for my organization as |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A O Don't Know O |

| 51. An analysis to identify high risk problem areas and jobs hacility in which I work. | nas been conducted for the |
|---|--------------------------------------|
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A C Don't Know C |
| | |
| 52. Information is available regarding injuries and illnesses | that occur in my work area. |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A C Don't Know C |
| | |
| 53. I am informed of the most common injury types (i.e. slips my work area. | s, trips, falls, etc.) that occur in |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A O Don't Know O |
| Hazard Control: Workforce exposure to all current and prevented or controlled by using engineering controls, administrative controls, and personal protective equipments. | work practices, |
| 54. I am aware that analyses are conducted to identify hazar workplace and that they are updated as needed. | rd control requirements for my |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A C Don't Know C |
| | |
| 55. Adherence to NASA, OSHA, and industry standards for ha work area. | zard control is required in my |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A O Don't Know O |
| | |
| 56. The equipment necessary to effectively control the hazar and periodically inspected. | ds in my workplace is in place |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A C Don't Know C |
| Maintenance: An effective safety and health program wi equipment maintenance, so that hazardous breakdown | |
| 57. I am confident that each piece of equipment that I use is safe to operate. | |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A C Don't Know C |
| | |
| 58. I am provided with adequate operating procedures, which information, for each piece of equipment that I operate. | n include safety hazard |
| Strongly Disagree O 1 O 2 O 3 O 4 O 5 Totally Agree | N/A O Don't Know O |
| Medical Program: An effective safety and health program medical program appropriate for the size and nature of hazards. | |
| 59. If identified as a job requirement, I receive physical exar specific medical requirements associated with my job. | ninations consistent with |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A C Don't Know C |
| | |
| 60. Health assessments are conducted in my work area to as environment. | sure a healthy work |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A O Don't Know O |

| 61. If I have a question regarding operations in which health hazards exist, I can get answers from the Occupational Health staff at my Center. | |
|---|---|
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A C Don't Know C |
| | |
| 62. When unique health risks (air quality, water quality, asbework area, adequate investigation is provided to analyze and satisfactorily. | estos, etc.) are identified in my d resolve the issues |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A O Don't Know O |
| | |
| 63. If required, a documented Personal Protective Equipment testing and maintenance (of respirators, clothing, etc.), is in my work area. | |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A O Don't Know O |
| | |
| 64. Safety equipment used in my work area is supported by documentation and appropriate training. | complete procedural |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A O Don't Know O |
| | |
| 65. Ergonomic evaluations are included as a part of the healt area. | th assessments for my work |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A C Don't Know C |
| Emergency Preparedness: There should be appropriate equipment for response to emergencies. Note: In some evacuate and call the fire department. | |
| 66. I am made aware of emergency plan updates in my work | area. |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A C Don't Know C |
| | |
| 67. Emergency plans are re-evaluated at least annually. | |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A O Don't Know O |
| 68. Emergency procedures exist for all potential hazards in r | ny work area |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A C Don't Know C |
| Strongry Disagree S 1 S 2 S 3 S 4 S 3 Totally Agree | IVA S BOIT KNOW S |
| 69. I participate in regular drills to learn and practice emerg | ency procedures. |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A O Don't Know O |
| | |
| 70. I am concerned that the equipment available in my work control all identified emergencies. | area may <u>not</u> be adequate to |
| Strongly Disagree 0 5 0 4 0 3 0 2 0 1 Totally Agree | N/A C Don't Know C |
| | |
| 71. Natural disaster emergency response plans (severe weat work area. | ther, fire, etc.) exist for my |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A C Don't Know C |

First Aid/Emergency care should be readily available for any injury or illness.

| 72. Fire and emergency rescue personnel are available to my worksite. | |
|---|----------------------------------|
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A C Don't Know C |
| | |
| 73. Adequate fire and rescue equipment is available to my wo | orksite. |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A O Don't Know O |
| | |
| 74. Trained personnel provide emergency services for my wo for ambulance, EMT's, or emergency rooms. | rksite which include provisions |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A C Don't Know C |
| | |
| 75. It is my belief that response time to my worksite of approand personnel will be at a minimum. | opriate emergency equipment |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A O Don't Know O |
| | |
| 76. Personnel trained in first-aid, CPR, and medical care are a area. | available from within my work |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A O Don't Know O |
| Safety and health training should cover the safety and h | ealth responsibilities of all |
| personnel who work at the site or affect its operation. | |
| 77. An individual training plan has been developed for me that health training requirements for my job. | at includes the safety and |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A O Don't Know O |
| | |
| 78. My employee training plan is updated to reflect changes i enhance employee safety awareness. | n facilities or processes and to |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A O Don't Know O |
| | |
| 79. My training covers all necessary topics, operations, and h | azards identified for my job. |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A O Don't Know O |
| | |
| 80. Knowledgeable persons conduct safety and health trainin | g courses. |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A O Don't Know O |
| | |
| 81. I am always notified of my retraining, makeup training, a requirements. | nd training modification |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A O Don't Know O |
| | |
| 82. If required on my job, my recertification and training req tracked. | uirements are documented and |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree | N/A O Don't Know O |

| 83. If required, my individual certification plan is based on job requirements defir applicable standards, worksite hazard identification, and workplace analysis. | ned by |
|--|-----------------|
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree N/A C Don't Kno | ow C |
| | |
| 84. When I started work in this area, I was given a formal safety orientation to allobecome familiar with the hazards and facility safety practices associated with my | |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree N/A C Don't Kno | ow © |
| | |
| 85. If required, I have received instruction from persons knowledgeable of Persor Protective Equipment (PPE) and must regularly demonstrate proficiency in equipment through drills and simulations. | nal nent use |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree N/A C Don't Kno | ow C |
| | |
| 86. A training program is provided for me which includes training in hazard identif safety requirements, and safe equipment operations, if required. | ication, |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree N/A C Don't Kno | ow O |
| | |
| 87. Training in the operation of any unique equipment which I may be required to adequate. | use is |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree N/A C Don't Kno | ow C |
| | |
| 88. Employees in my work area are encouraged to assist in developing training requirements. | |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree N/A C Don't Kno | ow C |
| | |
| 89. Employees from my work area are encouraged to request any special training believe they need. | they |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree N/A C Don't Kno | ow C |
| | |
| 90. Employees participate in establishing certification requirements on those jobs certification will result in increased job performance/safety (Certified Crane Oper etc.). | for which ator, |
| Strongly Disagree C 1 C 2 C 3 C 4 C 5 Totally Agree N/A C Don't Kno | ow O |
| Additional Comments: | |
| Additional Comments. | <u>A</u> |
| Submit Survey OR Reset All Answers | |

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Last Validated: 01-23-2001
Last Updated: 05/22/01 16:38:39
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